No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	Private Passenger Commercial 1,060,979 3.8% 2. Automobile Physical Damage Private Passenger Commercial 168,169 7.1% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No		(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
Commercial 1,060,979 3.8% 2. Automobile Physical Damage Private Passenger Commercial 168,169 7.1% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	Commercial 1,060,979 3.8% 2. Automobile Physical Damage Private Passenger Commercial 168,169 7.1% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	1.	Automobile Liability		
2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
Private Passenger Commercial 168,169 7.1% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No	Private Passenger Commercial 168,169 7.1% 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		Commercial	1,060,979	3.8%
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No	3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	2.	Private Passenger		
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No	4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No			168,169	7.1%
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No	5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No				
6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		_ ,		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				· · · · · · · · · · · · · · · · · · ·
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		•		
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		_		
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):				
Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		 		
Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		<u> </u>		
No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	Ooes filing only apply to certain territory (territories) or certain classes? If so, specify: No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	15.	-		
No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):	No Brief description of filing. (If filing follows rates of an advisory organization, specify organization):		Line of Insurance		
			iling only apply to certain territory (te	erritories) or certain classes? If so, specify	:
adoption of ISO loss cost revision with no modification					organization):

ACE American Insurance Company

Name of Company

Robert J. Reilly, Assistant Vice President

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
	Commercial	31,537	6.8%
2.	Automobile Physical Damage	31,337	0.070
۷.	Private Passenger		
	Commercial	11,989	10.6%
3.	Liability Other Than Auto	**,***	10,0,0
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	•	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
	Line of Hisurance		
Does f	filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	
No			
			,
		s rates of an advisory organization, specify of	organization):
adoj	otion of ISO loss cost revision v	with no modification	

ACE Fire Underwriters Insurance Company
Name of Company

Robert J. Reilly, Assistant Vice President Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	763,001	7.3%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	27,760	2.6%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	
No			
		s rates of an advisory organization, specify o	organization):
ado	ption of ISO loss cost revision v	with no modification	
			· · -

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE Property & Casualty
Insurance Company

Name of Company

Robert J. Reilly, Assistant Vice President

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Assess abile Timbility		
1.	Automobile Liability Private Passenger		
	Commercial	\$232,116	-6.8%
2.	Automobile Physical Damage	\$252,110	-0.870
۷.	Private Passenger		
	Commercial	\$101,457	-6.8%
3.	Liability Other Than Auto	\$101,437	-0.070
3. 4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
1.	Line of Insurance		
	Zine or insurance		
Does f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify:	
na		, , ,	
			-
3rief o	description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
		ars CA-2014-111 & 112. Also, revising our	
amen	ding rules to allow package, experien	ce and schedule rating to apply to non-fleet	•

All America Insurance Company
Name of Company

Mrs. Petrise Meyer Sr Rates and Forms Analyst Official - Title

result from application of new rates.

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or	rate level produced by rate revision	on
effective 02/01/2015		

	ellective oziolizata	<u> </u>	
-	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	volume (minoro)	_ Grange (*Gr)
••	Passenger		
	Commercial	903,228	6.2
2	Automobile Physical Damag	903,226	0.2
2	Private Passenger		•
	Commercial	110,981	15.4
2		110,961	15.4
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6. -	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
•	Daniel Clare and a such to a set	i 4	
	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If fi	lling follows rates of an a	dvisory
	Organization, specify		
	organization):		SO Revision Designation Numbers
	CA-2014-BRLA1 & CA-2014-RPAC1 on	February 1, 2015	
			
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.		
			ve Insurance Corporation
			me of Company
		Stephen J. Corbett	
			Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ate level produced by rate revision
effective 02/01/2015	

	(1)	(2)	(3)
_	()	Annual Premium	Percent
-	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial	29,596	6.2
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial	7,312	15.4
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,	in ternory (terniones) or	Certain
	specify: No		
	specify.		
	Brief description of filing. (If f	iling follows rates of an a	dvison
	Organization, specify	ang ronows rates or arra	avisory
	organization):	AFH propose to adopt ISC	Revision Designation Number
	CA-2014-BRLA1 & CA-2014-RPAC1 on		The training of the training of
	CA-2014-BREAT & CA-2014-REACTOR	rebliary 1, 2010	
	*Adjusted to reflect all prior ra	te changes	
	**Change in Company's prem		It from application of new
	rates.		a water approach of the transfer of the transf
		American Family F	lome Insurance Company
			me of Company
		Manuel Z Rios - Pre	
		(Official – Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Cha	ange in Company's premium or rate lev	el produced by rate revision effective	1/1/2015
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
••	Passenger Commercial	\$979,255	3.8%
2.	Automobile Physical Damage		
	Private Passenger Commercial	\$301.942	2.9%
3.	Liability Other Than Auto		
4.	Burglary and Theft		-
5.	Glass		
6.	Fidelity	-	
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
-	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	No
D. /	A decidence of Eller Alf Eller fellows in		
		ates of an advisory organization, specify organi	
		14-RILC and CA-2014-BRLA1 with company deviation of	-10.0% and experience modifications
01 +4	11.4% (Liability) & +15.8% (physical damage) %	ı	
	· · · · · · · · · · · · · · · · · · ·		
*Δd	justed to reflect all prior rate changes.		
		nich will result from application of new rates.	
	nange in company a promisin forci wi	non viii roodit nom approation of non ratios.	
		American G	uarantee & Liability
		· · · · · · · · · · · · · · · · · · ·	of Company
		Deborah Freeman - Regulatory S	Services Analyst I
			cial – Title

FORM (RF-3)

SUMMARY SHEET

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
Automobile Liability Private	Volume (fillions)	Charige (101-)
Passenger		
Commercial	100,303	6.2
Automobile Physical Damag	100,303	0.2
Private Passenger		
Commercial	38,648	15.4
Liability Other Than Auto	<u> </u>	
Burglary and Theft	· · · · · · · · · · · · · · · · · · ·	
Glass		······································
Fidelity		
Surety		
Boiler and Machinery		· · · · · · · · · · · · · · · · · · ·
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Other		
Line of Insurance		
Does filing only apply to cert Classes? If so,	ain territory (territories) or	r certain
specify: No No		
Brief description of filing. (If	filing follows rotes of an a	advicen.
Organization, specify	illing follows rates of arra	id visory
organization):	ASH propose to adopt IS	O Revision Designation Number
CA-2014-BRLA1 & CA-2014-RPAC1 or		
*Adjusted to reflect all prior r **Change in Company's prer rates.		ılt from application of ne
Tatos.	American Souther	n Home Insurance Company
		me of Company
	Manuel Z Rios - Pr	
		Official - Title

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Ch	ange in Company's premium or rate lev	el produced by rate revision effective	1/1/2015
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private		
''	Passenger Commercial	\$292,980	3.2%
2.	Automobile Physical Damage	\$232,300	5.270
	Private Passenger Commercial	\$123,524	-2.0%
3.	Liability Other Than Auto		-2.070
4.	Burglary and Theft		
5.	Glass		· -
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		-
9.	Fire		
	Extended Coverage		
	Inland Marine		
12.	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (to	erritories) or certain classes? If so, specify:	No
Brie	ef description of filing. (If filing follows ra	ates of an advisory organization, specify organ	ization):
	up filling to adopt ISO loss cost revisions CA-20 41.4% (Liability) & +15.8% (physical damage) %	14-RILC and CA-2014-BRLA1 with company deviation of	+10.0% and experience modifications
	ijusted to reflect all prior rate changes. hange in Company's premium level wh		urich Insurance Co. of Company Services Analyst I
		Off	icial – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premi	um or rate level	produced by rate	e revision
effective 01/01/2015			

	(1)	(2) Annual Premium	(3) Percent
	Coverage -	Volume (Illinois) *	_ Change (+or-) **
-	Automobile Liability Private		
	Passenger	\$397.00	-0.1%
	Commercial	N/A	N/A
	Automobile Physical Damag		
	Private Passenger	\$213.00	0.0%
	Commercial	N/A	N/A
	Liability Other Than Auto	\$130.00	0.0%
	Burglary and Theft		
	Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
	Other		
	Life of Insurance		
	Does filing only apply to certa	in territory (territories) o	r certain
	Classes? If so,	,	
	specify: No		
	Brief description of filing. (If fi	iling follows rates of an a	advisory
	Organization, specify		
	organization):	ISO (CA-2014-RILC) & (C	CA-2014-RIL1)
	*Adjusted to reflect all prior re	to changes	
	*Adjusted to reflect all prior ra **Change in Company's prem		alt from application of now
	rates.	iidiri level wilici i wili lest	ж поттаррисацоп от нем
	iacs.	Ansur Amercia Inc	surance Company
			ame of Company
		Joshua Stephens.	• •

1.

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3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

| (1) | (2) | (3) |
|------------------------------|---------------------|--------------------|
| | Annual Premium | Percent |
| Coverage | Volume (Illinois) * | _ Change (+or-) ** |
| Automobile Liability Private | | |
| Passenger | 666,621 | 1.7% |
| Commercial | | |
| Automobile Physical Damag | | |
| Private Passenger | 207,989 | 5.4% |
| Commercial | | |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Line of Insurance | | |

Classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of ISO Loss Cost Filing CA-2014-BRLA1

Atlantic Specialty Insurance Company

Name of Company

Josette D. Kiel, Chief Underwriting Officer

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/1/14 new & 12/1/14 renewal

| | *** | | |
|-----|-------------------------------------|-------------------------------|----------------------------|
| _ | (1) | (2) | (3) |
| _ | ` ' | Annual Premium | Percent |
| - | Coverage - | Volume (Illinois) * | Change (+or-) ** |
| 1. | Automobile Liability Private | | |
| | Passenger | | |
| | Commercial | 311,337 | 8% |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | | |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | ··· | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Othe <u>r</u> | | |
| | Line of Insurance | | |
| • | Does filing only apply to certa | in territory (territories) or | certain |
| | Classes? If so, | ar torniory (torniorioo) or | oon can r |
| | specify: No | | |
| | | | |
| | Brief description of filing. (If fi | iling follows rates of an a | dvisory |
| | Organization, specify | | • |
| | organization); | Commercial Auto ISO Del | ay Adoption |
| | Rules: CA-2014-RPAC1 Loss Costs: CA | \-2014-BRLA1 | |
| | | | |
| | *Adjusted to reflect all prior ra | | |
| | **Change in Company's prem | iium level which will resu | It from application of new |
| | rates. | | |
| | | Capitol Indemnity | |
| | | | me of Company |
| | | Stephanie Pasker, | |
| | | (| Official – Title |

| Coverage Volume (Illinois)* 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail | Change (+ or -)** -8.7% |
|--|--------------------------|
| Private Passenger Commercial \$308,776 2. Automobile Physical Damage Private Passenger Commercial \$92,969 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| Commercial \$308,776 2. Automobile Physical Damage Private Passenger Commercial \$92,969 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 2. Automobile Physical Damage Private Passenger Commercial \$92,969 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| Private Passenger Commercial \$92,969 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | -8.7% |
| Commercial \$92,969 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | -8.7% |
| 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | -8.7% |
| 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril | |
| 12. Homeowners 13. Commercial Multi-Peril | |
| 13. Commercial Multi-Peril | |
| | |
| 14 Casa Dail | |
| | |
| 15. Other | |
| Line of Insurance | |
| Does filing only apply to certain territory (territories) or certain classes? If so, specify: | |
| | • |
| na . | |

- * Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

Central Mutual Insurance Company Name of Company

Mrs. Petrise Meyer Sr Rates and Forms Analyst Official - Title

Change in Company's premium or rate level produced by rate revision effective 1/1/2015 .

| | (1)
Coverage | (2)
Annual Premium
<u>Volume (Illinois) *</u> | (3)
Percent
<u>Change (+ or -) **</u> |
|------|--|---|---|
| | <u>Coverage</u> | volume (Illinois) | Sharige (· Or 1 |
| 1. | Automobile Liability | | |
| | Private Passenger | \$4,923,806 | -1.5% |
| 2. | Commercial Automobile Physical Damage Private Passenger | ψ+,323,000 | 1.070 |
| | Commercial | \$1,407,691 | +0.2% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | <u></u> | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Doe | es filing only apply to certain territory (t | erritories) or certain classes? | If so, specify: |
| Brie | of description of filing. (If filing follows | rates of an advisory organiza | tion, specify organization): |
| R | evising Federated Type of Business Fevising Wind & Hail Replacement and | actors. Repairs Factors | |
| | emoving Optional Increased Coverage | • | 23 |
| | | | |
| ** C | Adjusted to reflect all prior rate cha
change in Company's premium level w
vill result from application of new rates | hich | |
| | | N | lame of Company |
| | | Federated | Mutual Insurance Company
Filzen - Vice President |
| | | | Official - Title |

Change in Company's premium or rate level produced by rate revision effective $\frac{1}{1}$.

| | (1) | (2)
Annual Premium | (3)
Percent |
|----------|--|-------------------------------|---------------------------|
| | Coverage | Volume (Illinois) * | <u>Change (+ or -) **</u> |
| 1. | Automobile Liability Private Passenger | | |
| 2. | Commercial Automobile Physical Damage Private Passenger | \$1,298,938 | 0.0% |
| | Commercial | \$271,880 | +0.9% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | · · |
| 5. | Glass | | <u> </u> |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 0. | Extended Coverage | | |
| 1. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| 4. | Crop Hail | | |
| 5. | Other | | |
| | Line of Insurance | | |
| <u>N</u> | es filing only apply to certain territory (| • | so, specify: |
| R | of description of filing. (If filing follows evising Federated Type of Business levising Wind & Hail Replacement and emoving Optional Increased Coverage | Factors. d Repairs Factors. | |
| | emoving Optional increased Coverag | e for work changes on CA-R-2. |).
 |
| * C | Adjusted to reflect all prior rate cha
change in Company's premium level wall
rill result from application of new rates | vhich | |
| | | Na | me of Company |
| | | Federat | ed Service Company |
| | | | zen - Vice President |
| | | | Official - Title |

FORM (RF-3)

SUMMARY SHEET

| (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|--|---|---|
| Automobile Liability Priv
Passenger | rate | |
| Commercial | 4619 | -3.3% |
| Automobile Physical Da | mag | |
| Private Passenger | | |
| Commercial | 2613 | -13.5% |
| Liability Other Than Aut | 0 | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | - | · · · · · · · · · · · · · · · · · · · |
| Extended Coverage | | |
| nland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail
Other | | * ************************************* |
| Life of Insurance | 9 | |
| Does filing only apply to Classes? If so, | certain territory (territories) c | or certain |
| specify: <u>r</u> | No | |
| Brief description of filing
Organization, specify
organization): | g. (If filing follows rates of an Modified ISO Rules-CA IL RU (| advisory |
| | | |
| *Adjusted to reflect all p **Change in Company's rates. | orior rate changes.
s premium level which will res | ult from application of ne |
| | | |
| | 1st Auto & Casua | alty Insurance Company |

FORM (RF-3)

SUMMARY SHEET

| (1) | (2)
Annual Premium | (3)
Percent |
|--|---|---|
| Coverage | Volume (Illinois) * | Change (+or-) ** |
| Automobile Liability Private Passenger | | |
| Commercial | \$13859 | +13.2% |
| Automobile Physical Damag
Private Passenger |) | |
| Commercial | \$7101 | -23% |
| Liability Other Than Auto | 3/101 | -2376 |
| | | |
| Burglary and Theft
Blass | *************************************** | |
| | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery
Fire | | |
| · = | | |
| Extended Coverage | | |
| nland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | Mild and add an annual and an an annual and an annual and an an annual and an |
| Crop Hail | | |
| Other Life of Insurance | n gelas continue | 9-10-1 |
| Does filing only apply to cer | tain territory (territories) or | certain |
| Classes? If so. | , ((())) | |
| specify: No | | |
| · · · | | <u> </u> |
| Brief description of filing. (I | f filing follows rates of an a | dvisory |
| Organization, specify | | |
| organization): | Modified ISO Rules-CA IL | 2014 RU 001, Modified ISO Illi |
| Loss Costs-CA IL 2014 LC 001 | | |
| | . 1 | |
| *Adjusted to reflect all prior | rate changes. | |

1st Auto & Casualty Insurance Company
Name of Company
William Viney, Research and Development Manager
Official – Title

. `

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium | or rate lev | el produced by | rate revision |
|-----------------------------|-------------|----------------|---------------|
| effective 07/01/2015 | | | |

| - | (1) | (2)
Annual Premium | (3) Percent | | |
|------------|---|--------------------------------|------------------------------------|--|--|
| 4 | Coverage | Volume (Illinois) * | Change (+or-) ** | | |
| 1. | Automobile Liability Private | | | | |
| | Passenger | | | | |
| _ | Commercial | 297,549 | +12.5 | | |
| 2 | Automobile Physical Damag | | _ | | |
| | Private Passenger | | | | |
| | Commercial | 110,510 | +1.8 | | |
| 3. | Liability Other Than Auto | | | | |
| 4. | Burglary and Theft | | | | |
| 5. | Glass | | | | |
| 6 . | Fidelity | | | | |
| 7. | Surety | | | | |
| 8. | Boiler and Machinery | | | | |
| 9. | Fire | | | | |
| 10. | Extended Coverage | | | | |
| 11. | Inland Marine | | | | |
| 12. | Homeowners | | | | |
| 13. | Commercial Multi-Peril | | | | |
| 14. | Crop Hail | | | | |
| 15. | Other | | | | |
| | Life of Insurance | | | | |
| • | | | | | |
| | Does filing only apply to certain | in territory (territories) or | certain | | |
| | Classes? If so, | | | | |
| | specify: All class | es excluding Educational Inst | titutions | | |
| | | | | | |
| | Brief description of filing. (If fi | ling follows rates of an ac | dvisory | | |
| | Organization, specify | _ | • | | |
| | organization): | With this filing we are p | proposing a 12.5% increase to | | |
| | liability and a 1.8% increase to physical | sical damage for all classes e | xcluding Educational Institutions. | | |
| | The overall effect of this filing is +9 | | | | |
| | *Adjusted to reflect all prior ra | te changes. | | | |
| | **Change in Company's premium level which will result from application of new | | | | |

Graphic Arts Mutual Insurance Company

Name of Company

Diane Hausserman, Assistant Vice President & Managing Actuary

Official — Title

rates.

ILLINOIS SUMMARY SHEET FORM RF-3

| Cha | nge in Company's premium or rate level produced by | y rate revision effective <u>January</u> | 1, 2015 |
|-------|--|--|---------------------|
| | (1) | (2) Annual Premium | (3)
Percent |
| 4 | Coverage | Volume (Illinois)* | Change (+ or -)** |
| 1. | Automobile Liability | | |
| | Private Passenger | 004.400.500 | . 4.70/ |
| _ | Commercial | \$34,136,583 | +4.7% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| _ | Commercial | <u>\$12,144,340</u> | +7.4% |
| 3. | Liability Other than Auto | <u></u> | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Workers Compensation | | |
| 16. | Other | | |
| | Line of Insurance | | |
| | | | |
| Doe | s filing only apply to certain territory (territories) or ce | rtain classes? If so, specify No | |
| | | | |
| Brie | f description of filing (if filing follows rates of an advis | ory organization, specify organizati | on) Revised primary |
| liabi | lity, medical payments, and physical damage base ra | ates. Recognized the changes in th | e minimum mandatory |
| | s of motor vehicle insurance for uninsured and under | | |
| * | Adjusted to reflect all prior rate changes. | mariou materiale est el agrec. | |
| | • | Marine and the officer of the second | |
| ** | Change in Company's premium level which will resu | ilt from application of new rates. | |
| | | Great West Casualty C | Company |
| | - | Name of Con | |
| | | | to a suf |
| | | Charles J. Ry
Sr. Assistant A | |
| | - | Official - Ti | |

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2015

| | (1)
Coverage | (2)
Annual Premium
Volume (Illinois)* | (3)
Percent
Chang <u>e (+ or -)**</u> |
|-----|--|---|---|
| | OOVERAGE | volume (minors) | onango (+ o.) |
| 1. | Automobile Liability Private Passenger Commercial | 929,146 | 6.2 |
| 2. | Automobile Physical Damage Private Passenger Commercial | 83,980 | 15.4 |
| 3. | Liability Other Than Auto | | |
| 4. | Burgiary and Theft | | |
| 5. | Glass | · · · · · · · · · · · · · · · · · · · | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| | Other | | |
| | Line of Insurance | | |
| Doe | es filing only apply to certain territory (t | erritories) or certain classes? If so, specify: | no |
| | ef description of filing. (If filing follows i | rates of an advisory organization, specify org | ganization): |
| | · tapaa. | | |
| | justed to reflect all prior rate changes.
hange in Company's premium level wh | nich will result from application of new rates. | |
| | | Greenwich Insurance Company | |
| | | Na | me of Company |
| | | Mark Stockbridge - Vice Preside | ent |
| | | | Official - Title |

Change in Company's premium or rate level produced by rate revision effective 3/1/2015

| | (1) | (2)
Annual Premium | (3)
Percent |
|---------|---|--|--------------------------|
| | Coverage | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | \$450,913 | +7.4% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | \$159,265 | +13.7% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Door | filing only apply to certain territory (territori | es) or certain classes? If so, specify: | |
| No. | ming only apply to certain termory (termon | es) of derialit diasses: It so, specify. | |
| | | | |
| | | | |
| Brief o | description of filing. (If filing follows rates o | f an advisory organization, specify organization | on): |
| | ting ISO loss costs found in reference f | | • |
| | | | |
| | | | |
| | | | |

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Pioneer Specialty Insurance Company

Name of Company

Janis Eichorst, Product Development Analyst

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premiur | m or rate leve | I produced by i | rate revision |
|-----------------------------|----------------|-----------------|---------------|
| effective 07/01/2015 | • | · - | |

| - | (1)
Coverage | (2)
Annual Premium
Volume (Illinois) * | (3)
Percent
Change (+or-) ** |
|----|--|--|--|
| | Automobile Liability Private | voidino (minoro) | |
| | Passenger | | |
| | Commercial | 251,008 | +12.5 |
| | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | 73,314 | +1.8 |
| | Liability Other Than Auto | | |
| | Burglary and Theft | | |
| | Glass | | |
| | Fidelity | | |
| | Surety | | |
| | Boiler and Machinery | | |
| | Fire | | |
| Э. | Extended Coverage | | |
| 1. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| 4. | Crop Hail | | |
| 5. | Other | | |
| | Life of Insurance | | |
| • | Does filing only apply to certa Classes? If so, specify: All class | in territory (territories) or
ses excluding Educational Ins | |
| | specify. All class | ses excluding Educational ins | ittations |
| | Brief description of filing. (If fi | ling follows rates of an a | dvisory |
| | Organization, specify | ing renews rates or arra- | a visor y |
| | organization): | With this filing we are a | proposing a 12.5% increase to |
| | liability and a 1.8% increase to physical | | |
| | The overall effect of this filing is +9 | | The state of the s |
| | *Adjusted to reflect all prior ra | | |
| | **Change in Company's prem | | t from application of new |

Republic-Franklin Insurance Company
Name of Company
Diane Hausserman, Assistant Vice President & Managing Actuary
Official — Title

^{**}Change in Company's premium level which will result from application of new rates.

FORM (RF-3)

SUMMARY SHEET

| (1)
Coverage | (2) Annual Premium Volume (Illinois) * | (3) Percent Change (+or-) ** |
|---|--|---------------------------------------|
| Automobile Liability Private Passenger | | |
| Commercial | 5,371,916 | +0.7% |
| Automobile Physical Damag
Private Passenger | | |
| Commercial | 1,040,694 | 2.4% |
| Liability Other Than Auto | | |
| Burglary and Theft | | |
| Glass | | |
| Fidelity | | |
| Surety | | |
| Boiler and Machinery | | |
| Fire | | |
| Extended Coverage | | |
| Inland Marine | | |
| Homeowners | | |
| Commercial Multi-Peril | | |
| Crop Hail | | |
| Other | | |
| Life of Insurance | | |
| Does filing only apply to certa Classes? If so, | in territory (territories) or | certain |
| specify: revision | applies to all territories | · · · · · · · · · · · · · · · · · · · |
| D: 61 -: 11: 65: 416 | | |
| Brief description of filing. (If file Organization, specify | · · | • |
| organization): | Adopting Loss Costs - CA | -2014-BRLA1, CA-2014-RPAC1 |
| | | |
| *Adjusted to reflect all prior ra | • | |
| **Change in Company's prem | ium level which will resu | It from application of ne |
| rates. | _ | |
| | Sentry Select Insu | rance Company |

Name of Company
Mike Williams - VP Chief Actuary

Official - Title

| | (1) | (2) | (3) |
|---------------|---|---|--|
| | , , | Annual Premium | Percent |
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| | Private Passenger | | |
| | Commercial | \$279,364 | |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | #100.252 | .0.20/ |
| 2 | Commercial | \$198,352 | +8.3% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | · | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 0. | Extended Coverage | | |
| 1. | Inland Marine | | |
| 2. | Homeowners | | |
| 3. | Commercial Multi-Peril | | |
| 4. | Crop Hail | | |
| 5. | Other | | *************************************** |
| | Line of Insurance | | |
| No | Iling only apply to certain territory (| | |
| This
Trucl | kmen base rates for Liability, Collis | ckmen base rates for Liability and sion and Comprehensive coverages | specify organization): d Comprehensive coverages and revise. A minimum policy premium has been has been made to the General Rules. |
| | | | |
| | . | | |
| * C | djusted to reflect all prior rate change thange in Company's premium level value from application of new rates. | | |
| | | | Shelter General Insurance Co. |
| | | | Name of Company |
| | | | Brian Marcks - Coordinator of Ins. |
| | | | Dept. Affairs Official - Title |

FORM (RF-3)

SUMMARY SHEET

| Change in Company's premium or ra | ite level produced by rate revision |
|-----------------------------------|-------------------------------------|
| effective 07/01/2015 | |

| - | (1) | (2)
Annual Premium | (3)
Percent |
|-----|--|-------------------------------|-------------------------------------|
| | Coverage | Volume (Illinois) * | Change (+or-) ** |
| 1. | Automobile Liability Private | | |
| | Passenger | | . <u> </u> |
| | Commercial | 996,327 | +12.5 |
| 2 | Automobile Physical Damag | | |
| | Private Passenger | | • |
| | Commercial | 311,530 | +1.8 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| 14. | Crop Hail | | |
| 15. | Other | | |
| | Life of Insurance | | |
| • | - C. | | |
| | Does filing only apply to certa | in territory (territories) or | certain |
| | Classes? If so, | an eveluding Educational Inc | 414.141 |
| | specify: All class | ses excluding Educational Ins | mutons |
| | District and the state of the s | U 6 -U | d |
| | Brief description of filing. (If fi | ling follows rates of an ac | uvisory |
| | Organization, specify organization): | With this filing we are | proposing a 12 E9/ increase to |
| | liability and a 1.8% increase to phy | | proposing a 12.5% increase to |
| | The overall effect of this filing is +9 | | excluding Educational Institutions. |
| | *Adjusted to reflect all prior ra | | |
| | **Change in Company's prem | • | t from application of now |
| | Change in Company's piem | idiri levet witicit will tead | cirotti application ot new |

Utica Mutual Insurance Company
Name of Company
Diane Hausserman, Assistant Vice President & Managing Actuary
Official — Title

^{**}Change in Company's premium level which will result from application of new rates.

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2015

| | (1) | (2)
Annual Premium | (3)
Percent |
|------|---|---|--------------------------|
| | <u>Coverage</u> | <u>Volume (Illinois)*</u> | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger Commercial | 2,004,945 | 6.2 |
| 2. | Automobile Physical Damage Private Passenger Commercial | 576,580 | 15.4 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | · | |
| | Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | <u> </u> | |
| | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Ω | on filing and comply to portain torritors (| orritorios) or portain closecc? If so, specify: | |
| DOE | es filing only apply to certain territory (t | erritories) or certain classes? If so, specify: | no |
| | | | |
| Brie | ef description of filing. (If filing follows) | ates of an advisory organization, specify org | anization): |
| | Adoption | , , , , | , |
| | | | |
| | | | |
| *Ad | justed to reflect all prior rate changes. | | |
| **C | hange in Company's premium level wh | nich will result from application of new rates. | |
| | | | |
| | | XL Insurance America | |
| | | Nar | ne of Company |
| | | Mark Sockbridge - Vice Preside | nt |
| | | | Official - Title |

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2015

| | (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
|------|--|---|--|
| 1. | Automobile Liability Private | | |
| | Passenger Commercial | 392,943 | 6.2 |
| 2. | Automobile Physical Damage Private Passenger Commercial | 90,998 | 15.4 |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | <u> </u> | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| | Extended Coverage | | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | | |
| | Crop Hail | | |
| 15. | Other | | |
| Doe | Line of Insurance es filing only apply to certain territory (| erritories) or certain classes? If so, specify: | no |
| Brie | of description of filing. (If filing follows | rates of an advisory organization, specify org | ganization): |
| ISO | Adoption | | |
| | justed to reflect all prior rate changes.
hange in Company's premium level wh | nich will result from application of new rates. XL Specialty Insurance Compa | ny
me of Company |
| | | Mark Stockbridge - Vice Presid | ent |
| | | | Official – Title |

Change in Company's premium or rate level produced by rate revision effective 3/1/2015

| | (1) | (2) | (3) |
|---------|---|--|--------------------------|
| | | Annual Premium | Percent |
| | <u>Coverage</u> | Volume (Illinois)* | <u>Change (+ or -)**</u> |
| 1. | Automobile Liability | | |
| ٠. | Private Passenger | | |
| | Commercial | \$2,333,397 | +5.4% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger | | |
| | Commercial | \$554,555 | +11.4% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| 10. | Extended Coverage | | |
| 11. | Inland Marine | | |
| 12. | Homeowners | | |
| 13. | Commercial Multi-Peril | | |
| - 14. | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| | | | |
| | filing only apply to certain territory (territo | ries) or certain classes? If so, specify: | |
| No. | | | |
| | | | |
| Drief e | locariation of filing. (If filing follows rates | of an advisory organization, specify organizat | ion): |
| | ting ISO loss costs found in reference | | non). |
| Auop | any 100 1033 00313 100110 in releience | ming wit awar itseam | |
| | | | |
| | | | |

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Western National Mutual Insurance Company

Name of Company

Janis Eichorst, Product Development Analyst

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Cha | ange in Company's premium or rate lev | el produced by rate revision effective | 1/1/2015 |
|-------|---|--|--|
| | (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)</u> * | (3)
Percent
<u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger Commercial | \$17,008,484 | 2.0% |
| 2. | Automobile Physical Damage | | |
| | Private Passenger Commercial | \$1,856,286 | 1.1% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| | Extended Coverage Inland Marine | | |
| | Homeowners | | |
| . — . | Commercial Multi-Peril | | |
| | Crop Hail | | |
| | Other | | |
| | Line of Insurance | | |
| | | | |
| Do | es filing only apply to certain territory (t | erritories) or certain classes? If so, specify: | No |
| Gro | | ates of an advisory organization, specify organ
14-RILC and CA-2014-BRLA1 with company deviation of | |
| | ljusted to reflect all prior rate changes.
hange in Company's premium level wh | | rican Insurance Co.
e of Company |
| | | Deborah Freeman - Regulatory | Services Analyst I |
| | | | ficial - Title |

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

| Ch | ange in Company's premium or rate lev | el produced by rate revision effective | 1/1/2015 |
|------|--|---|--|
| | (1)
<u>Coverage</u> | (2)
Annual Premium
<u>Volume (Illinois)*</u> | (3)
Percent
<u>Change (+ or -)**</u> |
| 1. | Automobile Liability Private Passenger Commercial | \$4 59,420 | 5.1% |
| 2. | Automobile Physical Damage
Private Passenger Commercial | \$88,340 | 2.5% |
| 3. | Liability Other Than Auto | | |
| 4. | Burglary and Theft | | |
| 5. | Glass | | |
| 6. | Fidelity | | |
| 7. | Surety | | |
| 8. | Boiler and Machinery | | |
| 9. | Fire | | |
| | Extended Coverage | HFNe- or | |
| | Inland Marine | | |
| | Homeowners | | |
| | Commercial Multi-Peril | | was a second |
| | Crop Hail | | |
| 15. | Other | | |
| | Line of Insurance | | |
| Do | es filing only apply to certain territory (to | erritories) or certain classes? If so, specify: | No |
| | | | |
| Brie | ef description of filing. (If filing follows ra | ates of an advisory organization, specify organ | nization): |
| | up filling to adopt ISO loss cost revisions CA-20 41.4% (Liability) & +15.8% (physical damage) % | 14-RILC and CA-2014-BRLA1 with company deviation of | f +10.0% and experience modifications |
| | | | |
| | ljusted to reflect all prior rate changes.
hange in Company's premium level wh | nich will result from application of new rates. | |
| | | Zurich Americ | can Insurance Co. Of IL |
| | | Nam | ne of Company |
| | | Deborah Freeman - Regulatory | Services Analyst I |
| | | | fficial – Title |